

## Quality Measure Review Process

**Introduction:** *Three levels of review are proposed below for application to each measure under consideration for the Connecticut's core quality measure set. The criteria that correspond to each level will be applied to all measures in the summary table before moving on to the next level.*

### Level 1

- Is the measure part of the Medicare ACO SSP set?
- Does the measure address a significant population health concern based on prevalence?
- Does the measure address a health disparity concern?
- Is there another compelling reason that the measure should be used for SSP, e.g., the measure represents a known patient safety, quality, or resource efficiency/cost concern?

*Action:* Provisionally accept if [one, two three??] of the above is true.

### Level 2 (review all measures that pass level 1)

- Is the measure appropriate for VBP for Advanced network, FQHC, and/or ACO (e.g., eliminate measures recommended for individual clinicians, home health agencies, hospitals, etc.)
- Does measure meet feasibility, usability, accuracy and reliability standards?
- Is the measure easily tied to QI efforts at the level of the Advanced Network/FQHC/ACO?

*Action:* Provisionally accept if one of the above is true.

### Level 3 (for all measures that pass level 2)

- De-duplication
  - Is the measure the same or similar to another measure (e.g., “hospital admissions for asthma among older adults” is subsumed within “hospital admissions for COPD or asthma among older adults”)
- Culling
  - E.g., Is the measure a process measure for which an available outcome measure will suffice?
  - Does the measure represent an area where the state is already performing well, including for significant sub-populations (if known)
  - If the measures within a performance domain or sub-domain (e.g., diabetes care) are in excess of what is necessary to demonstrate improved performance, retain those measures which serve as the best indicators of improvement.
  - If the number of performance areas (e.g., diabetes care, epilepsy care) is too high, such that organizational focus and improvement would be compromised, Council will rank and retain the highest ranked areas.
- Check for conflicts w guiding principles
- Reconsider previously rejected measures if necessary

*Action:* Accept those that remain.